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Annual Report
of the
Medical Officer of Health
for 1925.

P. G. HORSBURGH, M.R.C.S., L.R.C.P., D.P.H.,
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Nuneaton :
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**MEMBERS OF THE HEALTH COMMITTEE,
1925.**

His Worship the Mayor: Alderman R. W. SWINNERTON,
J.P., M.B.E.

Chairman: Alderman T. HORTON, J.P.


Vice-Chairman: Councillor L. E. PRICE.

MEMBERS:

Alderman W. FRENCH, J.P.	Councillor C. T. EARP.
Councillor W. COOPER.	„ J. FAIRFIELD.
„ W. CROSHAW.	„ J. LUCAS.
„ T. DAFFERN.	„ W. MATTHEWS.
„ B. DAFFERN.	„ F. P. PEMBLETON.
	„ A. ROBERTS.

Co-opted Members—Maternity and Child Welfare.

The MAYORESS.	Mrs. H. C. JONES.
Mrs. BINDLEY.	Mrs. J. KNOX.
Mrs. W. FRENCH.	



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BOROUGH OF NUNEATON.

Health Department,
Newdegate Place,
Nuneaton.

15th May, 1926.

To the Chairman and Members of the Health Committee.

Gentlemen,

I have the honour to submit to you my first Annual Report on the health of the Borough.

The report is on the lines indicated in Circular 648 of the Ministry of Health.

I commenced my duties in July of the year, taking over affairs from Dr. Tapper who vacated the post on being appointed Medical Officer of Health to the Borough of Bromley.

The vital statistics for the year are not so satisfactory as last year, but they compare favourably with the statistics of the Country as a whole for the corresponding period.

The task of taking over the Department was greatly reduced by the efficient administration Dr. Tapper left behind him.

I should like to thank the Chairman, Vice-Chairman and Members of the Health Committee for the cordial help they have given me during my term of office.

The members of my staff, to whom my best thanks are due, have worked loyally for the good of the Department and the town in general.

I am,

Mr. Chairman and Gentlemen,

Your obedient Servant,

P. G. HORSBURGH,

Medical Officer of Health.

PHYSICAL FEATURES AND GENERAL CHARACTER OF AREA.

Area	...	...	...	...	10,596
Population	...	...	...	...	45,170
Inhabited houses (1921)	...	...	...	...	8,431
					1925 = 9,164
Separate occupiers (1921)	.	...	...	...	7,843
Rateable Value	...	...	...	...	£171,334
Penny Rate	...	...	...	...	£605
Rate levied for Health Department					5d.

The Borough, situated in the North-Eastern corner of Warwickshire, has an area of 10,596 acres, parts of which have rural characteristics.

The central portion of the town is at an altitude of 260-270 feet; from this part the ground rises north to Tuttle Hill (470 feet), south to Griff, and west to Tunnel Hill, whilst to the east the altitude remains nearly constant.

The geological formation of the area is of red marl.

The chief occupation of the area is for males, coal mining, which employs (at the 1921 census) 5,756 men, the next in importance being transport and communication workers, there being 1,393 men employed.

Textile workers are the chief among the female population.

These main industries (as regards number of persons employed) are fortunately not the only ones our population are dependent on for a livelihood, the manufacture of bricks, tiles, hats, sports requirements, etc., finds employment for many citizens.

There is no definite evidence of the chief industries causing any marked degree of ill-health.

I append below figures taken from the last Census relating to the chief occupations:—

	Males	Females
1.—Mining and Quarrying	5756	2
2.—Transport workers	1393	39
3.—Commercial, etc. (not clerks) .	826	473
4.—Metal workers	804	155
5.—Textile workers	555	1575
6.—Brick, Pottery, etc.	549	57
7.—Builders, Bricklayers, etc. ...	539	1
8.—Makers of Textile goods and articles of dress	426	968
9.—Workers in Wood and Furniture	305	9
10.—Agriculture	293	13
11.—Personal service (Clubs, hotels, etc.)	216	716
12.—Professional occupations	183	237
13.—Electrical apparatus makers and fitters	98	2
14.—Workers in skin and leather (not boots and shoes)	82	33

OUT RELIEF.

The amount expended for the financial year ended March 1926 in the Borough was £8,295 12s. 9d.

PROGRESS IN PUBLIC HEALTH.

The advances made by the Corporation during the last five years for the improvement of the general health of the inhabitants have been many; the vital statistics also bear tribute to the work carried out.

Death Rate (average)	Infantile Mortality Rate (average)
1901-5 ... 14.1	1901-5 ... 137
5-10 ... 11.4	5-10 ... 115.2
10-15 ... 12.2	10-15 ... 111
15-20 ... 12.2	15-20 ... 89.4
20-25 ... 9.9	20-25 ... 70.4

The main schemes which have been, and are being, carried out are as under:—

1.—Conversion scheme.

Privies converted.	Total remaining Dec. 31, 1925. Sewers available.
1921 ... 40	126
1922 ... 62	
1923 ... 83	
1924 ... 139	
1925 ... 50	
<hr/> Total 374	

2.—Abolition of ashpits.

Ashpits abolished.	Ashpits remaining Dec. 31, 1925. Sewers available.
1921 ... 24	64
1922 ... 43	
1923 ... 51	
1924 ... 59	
1925 ... 36	
<hr/> Total 213	

Water.— $4\frac{1}{4}$ miles of service main have been laid and 749 houses coupled up, also greatly increased quantity of water available, due to the bulk supply of water which is being taken from the City of Leicester Waterworks.

Sewage.—Five additional miles of sewers are now available for use.

Housing.—The Corporation have erected 380 houses during this period.

Maternity and Child Welfare.—An additional clinic was opened at Stockingford in 1924.

Ante Natal Clinic.—Two Ante-natal Clinics have been opened, one situated in Nuneaton and one in Stockingford.

School Medical Service.—The establishment of an additional minor ailment clinic at Stockingford.

The commencement of an Orthopædic scheme in conjunction with the Health Committee for the treatment of cases up to the age of 14 years.

Sunlight Home.—This home at Tuttle Hill was opened in 1923 and has more than justified its existence and it is hoped to be able, in the near future, to increase its scope.

Venereal Disease.—The County Council opened in the Borough a clinic for these diseases in 1924.

The amount of work that has been done by the Sanitary Inspectors to remedy housing defects, safeguard food supplies, etc., is so great that it cannot be tabulated here. This all important work has been carried on day by day with great efficiency. Although not spectacular work, it is work which has a marked beneficial effect on the general health of a district.

DEATHS.

	Death-rate 11.09		
Rates	1921	...	9.7
	1922	...	9.8
	1923	...	9.4
	1924	...	9.7

The total deaths recorded in the Borough during 1925 were 501, of these 266 were males and 235 females.

This gives a Death-rate of 11.09 per 1,000 of the population, as against 9.7 in 1924.

The rate, although higher than for the previous few years, is lower than that recorded for the Country as a whole, i.e., 12.2 (England and Wales).

Average Death-rates for the periods:—

1901-1910	.....	12.5
1911-1920	.....	12.2
1921-1925	.....	9.9

RESPIRATORY DISEASES.

The main increase in deaths for 1925 is recorded in the respiratory group, of which Pneumonia heads the list.

Influenza caused a total of 20 deaths, which is an increase of 8 over 1924 figures.

A pamphlet was issued in 1924 giving advice on prevention and treatment of this disease; these forms were also used during the 1925 epidemic.

At the beginning of the year a more virulent type of Measles was prevalent in the Borough, this disease accounted for 10 deaths as against 1 in the previous year.

Whooping cough was also present at the time of the Measles epidemic, and accounted for another 9 deaths, an increase of 8 deaths over the previous year.

HEART DISEASE.

Heart disease shows an increase over last year's figures: the age groups mainly affected being 45-65 and 65 and upwards. Many of the deaths from this disease in the younger age group have most frequently their starting point in early rheumatic fever (which itself caused 5 deaths this year). The mild case of rheumatic fever often leaves after-effects as grave as the more virulent type. It is all too common a practice of people to allow their children to get up before the required time has elapsed for a cure to take place.

Children suffering from rheumatic fever require to be kept in bed long after all pain and swelling has disappeared, in fact all cases of rheumatic fever, if we are to minimise the after-effects of heart disease, should be kept in bed for at least two, and preferably three, months.

CAUSES OF DEATHS.

1925.

Causes of deaths.	Male	Female	Totals
Enteric Fever	—	—	—
Smallpox	—	—	—
Measles	5	5	10
Scarlet Fever	—	2	2
Whooping Cough	4	5	9
Diphtheria	1	3	4
Influenza	14	6	20
Encephalitis Lethargica	1	2	3
Meningitis	1	—	1
Tuberculosis—Lungs	19	14	33
Other types	11	2	13
Cancer	20	25	45
Rheumatic Fever	4	1	5
Diabetes	4	5	9
Cerebral Hæmorrhage	11	13	24
Heart Disease	33	37	70
Arterio Sclerosis	3	5	8
Bronchitis	16	14	30
Pneumonia	30	20	50
Other respiratory diseases	2	2	4
Ulcer of stomach	3	2	5
Diarrhœa (under 2 years)	1	2	3
Appendicitis	4	1	5
Cirrhosis of Liver	2	1	3
Nephritis	2	9	11
Puerperal Sepsis	—	1	1
Accidents of Pregnancy	—	2	2
Premature Birth, etc.	20	13	33
Suicide	2	2	4
Violence	14	5	19
Other diseases	39	36	75
Ill-defined „	—	—	—
Totals	266	235	501

BIRTHS.

The number of children born in the Borough was 975; of these 491 were males and 484 females; included in these numbers are the illegitimate children who numbered 33. This gives a birth rate of 21.5 per 1,000 of the population, this is the lowest rate recorded for the Borough.

The percentage of illegitimate children unfortunately shows an increase, being this year 3.3% of all births, as against 2.6% in 1924.

The lowered birth rate and the increased illegitimate birth rate have factors in common. The housing problem plays an important part in both these rates, lack of housing accommodation causing many married couples to have limited or no family. The overcrowding in many of the houses with inadequate sleeping accommodation make for the precocious child and leads, I am convinced, indirectly to the increasing illegitimate birth rate.

Education and the thought for the future of the child also plays an important part in the general decline in the birth rate.

Ward	Legitimate	Illegitimate			Total
St. Nicholas	186	...	8	...	194
St. Mary's	239	...	9	...	248
Stockingford	286	...	7	...	293
Coton	231	...	9	...	240
Total	942	...	33	...	975

INFANTILE MORTALITY RATE.

1921 ... 66

1922 ... 78

1923 ... 75

1924 ... 58

1925 ... 77.9

The number of infants who died before reaching one year numbered 76, giving an infantile mortality rate of 77.9 per 1,000 births.

The infantile mortality rate of legitimate babies was 74.3, whilst that of illegitimate babies was 181.8.

The increase over last year's figures is caused by the greater number of deaths from respiratory diseases—26 in 1925 as against 14 in 1924. I have dealt elsewhere with pneumonia which is the main cause for this increase.

It is of interest to note that this year's number of deaths of children under 4 weeks has been greatly reduced—27 children dying as against 35 in 1924. It will be noted that this reduction is mainly in the premature birth column. This reduction to a degree can be claimed as a direct result of the ante-natal clinics, and should be further reduced as these clinics are more widely used. These, mainly preventable, premature births would be still further reduced if the expectant mother would only seek early advice. The majority of expectant mothers leave the consulting of their doctor, booking the midwife, etc., till such a time that little or nothing can be done to prevent these catastrophies which often occur in the first few weeks of the infant's life. The simple advice which is often given to the mother before the child is born is often disregarded because of its simplicity. The average mother will carry out some special form of treatment, but will disregard the simple fundamentals for the future well being of the yet unborn child.

When it is realised that pregnancy is a normal process and when the ordinary rules of health are practised the process carries on in a normal way, much of the preent causes of deaths of infants will be mitigated.

I tabulate below a table of the recorded deaths in infants for 1921 to 1925.

ANALYSIS OF INFANT DEATHS, 1925.

Cause of Death	Under 1 week	1-2 wks	2-3 wks.	3-4 wks.	Total und'r 4 wks	1-3 mths	3-6 mths	6-9 mths	9-12 mths	Total under 1 year
Whooping Cough...	—	—	—	—	—	1	—	1	1	3
Tuberculosis ...	—	—	—	—	—	—	1	—	—	1
Convulsions ...	—	—	—	—	—	1	2	—	—	3
Bronchitis...	1	—	—	—	1	—	3	1	2	7
Pneumonia ...	—	—	—	—	—	4	2	6	5	17
Diarrhœa ...	—	—	—	—	—	1	—	—	1	2
Enteritis ...	—	—	—	—	—	—	—	—	1	1
Gastritis ...	—	—	—	—	—	—	—	—	—	—
Suffocation ...	—	—	—	—	—	—	—	—	—	—
Injury at Birth ...	2	—	—	—	2	—	—	—	—	2
Ateleetasis ...	—	—	—	—	—	—	—	—	—	—
Malformation ...	1	1	1	—	3	2	—	1	1	7
Premature Birth ...	12	4	—	—	16	—	—	—	—	16
Marasmus, etc. ...	2	1	—	—	3	5	—	—	—	8
Other Causes ...	—	—	2	—	2	1	2	2	2	9
Total ...	18	6	3	—	27	15	10	11	13	76

ANALYSIS OF INFANT DEATHS, 1921-1925.

	1921	1922	1923	1924	1925
No. of Births	1135	1062	996	971	975
I.M.R.	66	78	75	58	77.9
Premature Birth ...	18	24	22	23	15
Respiratory Diseases	16	18	15	13	24
Marasmus	4	12	6	1	8
Communicable diseases	2	7	3	1	4
Gastro Enteritis ...	2	11	7	7	3
Convulsions	2	3	1	1	3
Other causes	10	17	17	12	19

VITAL STATISTICS,
1901—1925.

Year	Popula- tion	No. of Deaths	No. of Births	No. of Infant Deaths	Death Rate	Birth Rate	Infantile Mortality
1901	25,239	362	943	136	14.3	37.3	144
1902	26,084	364	903	117	13.9	34.6	131
1903	27,182	386	935	142	14.2	34.8	151
1904	28,159	423	1024	149	15.0	36.3	144
1905	29,709	384	977	113	12.7	32.8	115
1906	32,255	420	1043	167	13.0	32.3	160
1907	32,580	377	1026	138	11.5	30.1	134
1908	33,706	355	1163	110	10.5	34.5	94
1909	36,041	378	1135	104	10.4	31.2	91
1910	37,267	375	1200	117	10.0	32.2	97
Ten year Average	30,822	382	1034	129	12.5	33.6	126
1911	37,531	446	1173	133	11.8	31.2	113
1912	38,725	438	1155	120	11.3	29.6	103
1913	39,636	467	1166	122	11.7	29.4	104
1914	40,091	526	1200	143	13.1	29.9	119
1915	38,652	542	1053	123	14.0	27.2	116
1916	40,908	436	1008	79	11.5	24.6	78
1917	42,004	440	958	92	11.6	22.8	96
1918	40,817	602	891	90	16.5	22.0	100
1919	41,146	434	936	86	10.9	22.7	92
1920	41,128	397	1220	102	9.6	29.5	83
Ten year average	38,697	472	1076	109	12.2	26.8	100
1921	41,901	416	1135	76	9.9	27.0	66
1922	43,410	427	1062	83	9.8	24.4	78
1923	44,030	416	996	75	9.4	22.6	75
1924	44,620	438	971	57	9.7	21.6	58
1925	45,170	501	975	76	11.09	21.5	77.9

HOSPITALS.

1. **Tuberculosis.** No hospital or sanatorium is situated within the Borough for the treatment of tuberculosis, but the County Council have a sanatorium on our border (Bramcote) where our more advanced cases are treated. The milder cases are sent to Hertford Hill Sanatorium, near Warwick.

2. **Maternity Home.** The area is at the time of writing without provision for ordinary maternity cases. The General Hospital have under consideration a maternity ward, and it is to be hoped that this much required necessity will shortly be available for use.

Special maternity cases are at present dealt with at the General Hospital, but have to be accommodated in the general ward.

Cases were, up to 1924, taken into the labour ward at the Infirmary under the Board of Guardians, but now cases coming under the Poor Law Authority, with the exception of urgent cases, are transferred to Coventry.

3. **Children.** The General Hospital deals with urgent cases of surgical and medical diseases of children, but these have to be accommodated in the general wards.

The Poor Law Infirmary has beds available for 10 children, also a Children's Home with accommodation for about 40 cases.

The Corporation have accommodation for eight children at the Sunlight Home at Tuttle Hill, suffering from malnutrition, pre-tuberculosis and the like.

4. **Scarlet Fever.** Borough Isolation Hospital, Tuttle Hill. This has accommodation for 10 Scarlet fever cases. Another ward is being opened in the near future so that diphtheria cases can be admitted for this disease. Eight beds will be available.

5. **Smallpox.** No smallpox hospital is situated in the district. The Corporation has arrangements with the City of Coventry for the treatment and isolation of cases as they arise at Pinley Hospital.

6. **Orthopædic Hospital.** The Health and Education Authorities have arrangements for the treatment of cases at the Royal Orthopædic Hospital, Birmingham, in conjunction with the Orthopædic scheme in the Borough.

No provision is made in the district for unmarried mothers, illegitimate infants and homeless children, other than the Poor Law Institutions.

Ambulance Facilities—

(a) Infectious cases. The Corporation ambulance is used in all cases of infectious disease.

(b) Non-infectious and accident cases. The Red Cross and the various works' ambulances are utilised for these cases.

CLINICS.

Service.	Situation of Premises.	Days open.	Notes.
Maternity and Child Welfare. Welfare Centres	Coton Road, Nuneaton (Temporary structure).	Tuesdays and Wednesdays, 2.0—4.30 p.m.	Dr. Wood in attendance two half days per week
	Cross St., Stockingford (brick structure)	Mondays and Wednesdays, 2.0—4.30 p.m.	Dr. Forrest in attendance alternate Monday and Wednesday afternoons
Ante-natal Centre	Coton Road, Nuneaton	2nd Friday in month, 3.30 p.m.	Dr. Wood in attendance
	Cross St., Stockingford	4th Friday in month, 3.30 p.m.	Dr. Forrest in attendance
Dental Clinic	Coton Road, Nuneaton	Alternate Saturday, 2.30 p.m.	Mr. E. Thomas, L.D.S.
1-5 Minor Ailments	Coton Road, Nuneaton Cross Street, Stockingford	9-10 a.m. each morning Ditto	Medical Officer of Health in attendance
1-5 Inspection Clinic	Coton Road, Nuneaton Cross Street, Stockingford	10-12 a.m., Wednesdays 4-5 p.m., Wednesdays	Medical Officer of Health in attendance
School Medical Service. Treatment Clinic and Inspection Clinic	Newdegate Place Nuneaton (Converted dwelling)	Every weekday morning, 9-12 a.m.	School Medical Officer in attendance
	Cross Street, Stockingford (New brick structure)	Ditto	Ditto
Eye Clinic	Newdegate Place	2.30 p.m., Wednesdays	Dr. Rudd in attendance
T. & A. Clinic	Ditto	Thursdays, 8.0 a.m.	School Medical Officer and Dr. A. A. Wood
Ear Clinic	Ditto	As occasion arises	School Medical Officer
Orthopaedic Clinic	Ditto	4th Friday in month, 2.45 p.m.	Mr. Leather in attendance
Dental Clinic	Ditto	Monday, Wednesday, Thursday, and Friday afternoons	Mr. G. E. B. Williams in attendance

CLINICS—Continued.

Service.	Situation of Premises.	Days open.	Notes.
Tuberculosis. Dispensary	35, Coton Road (Converted dwelling)	Tuesdays, 11.0 a.m. to 4.0 p.m.	Dr. Cyriax in attendance (Under Coventry & Warwickshire Tuberculosis Com'tee).
Venereal Diseases Male Clinics Female	Cleansing Station Central Avenue Ditto	Fridays, 6.0 to 8.30 p.m. Tuesdays, 5.30 to 7.30 p.m. (intermediate daily treatment also provided— males 7 p.m., females by appointment)	Medical Officer of Health in attendance Ditto (Under Warwickshire C.C.)

STAFF OF THE HEALTH DEPARTMENT.

Medical Officer of Health, School Medical Officer, Superintendent Isolation Hospital, Superintendent Maternity and Child Welfare, Venereal Disease Medical Officer, Nuneaton:—

*P. G. HORSBURGH, M.R.C.S., L.R.C.P., D.P.H.

Deputy Medical Officer of Health:—

‡*A. A. WOOD, M.D., C.H.B.

Chief Sanitary Inspector:—

*G. W. ANDREW, C.R.S.I.

Additional Sanitary Inspector and Meat Inspector:—

*F. W. MORTIMER, C.R.S.I., San. Science Cert.

Pupil, Sanitary Inspector:—

H. LENTON.

Clerical Staff:—

Miss W. WOOD (Chief Clerk). Miss I. BIGGS.

MATERNITY & CHILD WELFARE:—

Medical Officers:—

‡*A. A. WOOD, M.D., C.H.B.

‡*T. H. FORREST, M.B., C.H.B.

Orthopædic Surgeon:—

‡*J. B. LEATHER, F.R.C.S.

Dental Surgeon:—

‡*E. THOMAS, L.D.S.

Health Visitors:—

*Mrs. ABBOTT, C.M.B. †*Miss E. K. Dearn, C.M.B.

*Miss I. TOWNSEND, C.M.B. †*Miss L. MACPHERSON,
C.M.B.

Orthopædic Nurse:—

*Miss I. HAWKINS.

ISOLATION HOSPITAL:—

*Miss A. RAWBONE (Matron).

Miss K. RICE (Sister).

VETERINARY OFFICER:—

‡H. A. BARRETT, M.R.C.V.S.

VENEREAL DISEASE ORDERLY:—

‡J. C GARDENER.

‡ Part-time Officers.

† Health Visitors Cert.

*Exchequer Grants.

PROFESSIONAL NURSING IN THE HOME.

(a) The general nursing in the homes is carried out by the Nuneaton Nursing Association, which is a voluntary body employing two full time nurses.

(b) **Infectious Diseases.** The home nursing of infectious diseases is carried out by the staff of the Borough Isolation Hospital who nurse all notifiable diseases, including measles.

(c) **Midwives.** All midwives are in non-subsidised private practice. Eight hold the C.M.B. and two are registered, making a total of ten.

Bacteriological Work. Specimens are examined free of cost to the Borough at the Birmingham University under the County Council scheme. The number of specimens examined were as follows:—

Diphtheria	302
Tuberculosis	171
Typhoid	6

PARTICULARS AS TO PERMISSIVE ACTS ADOPTED BY THE NUNEATON CORPORATION.

1.—THE INFECTIOUS DISEASES (NOTIFICATION) ACT, 1889, was adopted at a Meeting of the Council, held on the 30th October, 1889, to come into force on the 9th December, 1889.

2.—THE INFECTIOUS DISEASES (PREVENTION) ACT, 1890, was adopted at a Meeting of the Council, held on the 24th December, 1890, to come into force on the 9th day of February, 1891.

3.—THE PUBLIC HEALTH ACTS AMENDMENT ACT, 1890. Parts 2, 3, 4 and 5 were adopted at a Meeting of the Council, held on the 24th December, 1890, to come into force on the 12th day of July, 1891.

4.—THE HOUSING OF THE WORKING CLASSES ACT, 1890. Part 3 was adopted at a Meeting of the Council, held on the 12th day of June, 1901, to come into force on the 12th day of July, 1901.

5.—THE PRIVATE STREET WORKS ACT, 1892, was adopted at a Meeting of the Council, held on the 29th January, 1896, to come into force on the 2nd day of March, 1896.

6.—THE BATHS AND WASH-HOUSES ACT, 1896, was adopted at a Meeting of the Council, held on the 25th day of January, 1899.

7.—THE NOTIFICATION OF BIRTHS ACT, 1907, was adopted at a Meeting of the Council, held on the 3rd day of May, 1911, to come into force on the 1st July, 1911.

8.—THE PUBLIC HEALTH ACTS AMENDMENT ACT, 1907. The following parts and Sections were, by an Order of the Local Government Board—dated 24th February, 1909—declared to be in force in the Borough as from the 14th April, 1909, subject in some cases to certain conditions and adaptations:—

Part 2.

Sections 34, 35, 36, 37, 38, 43, 44, 45, 46, 47, 48, 49, 50 and 51 of Part 3.

Sections 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66 and 68 of Part 4.

Part 5.

Part 6.

Part 10.

9.—THE PUBLIC HEALTH ACTS AMENDMENT ACT, 1907. Sections 39, 40, 41 and 42 were, by an Order of the Ministry of Health, dated 25th June, 1923, declared to be in force in the Borough as from 16th July 1923.

10.—THE PUBLIC HEALTH ACT, 1925, was adopted at a Meeting of the Council, held on the 28th October, 1925, to come into force on the 1st December, 1925.

11.—NUNEATON CORPORATION ACT, 1919, was adopted by the Council at a Meeting of the Council held on 15th August, 1919.

12.—NUNEATON CORPORATION ACT, 1921, was adopted at a Meeting of the Council, on the 17th August, 1921.

WATER.

The water supply of the town is from two main sources, one situated at Whittleford, which is in the Borough. This supply is obtained from the sand stone which is overlying the coal measures from whence it is pumped to filters and reservoirs situated at Robinson's End, and then to the consumers by constant supply mains. This water is of satisfactory character.

The other main supply is obtained from the City of Leicester Water Works at Thornton. It is pumped to a reservoir on Tuttle Hill, and then by gravity to the town as a constant supply. This supply is treated by slow sand filtration at Thornton before entering the mains. The results of analysis have not always been entirely satisfactory, although at the time of writing some improvement has taken place. I append below the latest results of analysis.

This supply was taken in the first instance in 1923, and 250,000 gallons per diem had to be used by the Corporation. On January 1st, 1926, this amount was automatically increased to 500,000 gallons per diem. This automatic increase makes it important that at all times this water should be of un-

questionable purity. This question is being actively dealt with by the Water Committee, and I hope by the time of publishing this report we shall have a utopian supply.

The houses in the district which are supplied with town water number 8,990.

We still have a few houses (168) which are supplied by wells. The number of these houses which can be connected to the town's water main is 22, the remaining 146 being at such a distance from the service pipes that they cannot at the time be connected.

WATER ANALYSIS.

	Whittleford	Thornton. Filtered Water from clear water tanks.
Free and Saline Ammonia ...	.000	0.0005
Albuminoid Ammonia ... ..	.002	0.015
Chlorine in Chlorides	3.6	1.600
Nitrogen in Nitrates and Nitrites	.058	trace
Oxygen absorbed from perman- ganate at 80° F. in 4 hours ...	.020	0.217
Total Solids dried at 100° C. ...		25.5
Hardness { Temporary	12	0.90
{ Permanent	28	15.10
{ Total	40	16.00
Appearance	Iron .01	Bright, many small particles
Organisms per c.c. at 37° C. ...	3	30
Organisms per c.c. at 20° C. ...	12	46
Organisms indicative of sewage contamination	Absent from 100 c.c.	Streptococci and spores of bacilli; Enteritidis absent from 100 c.c. Coliform bacilli absent from 50 c.c., present in 100 c.c.

RIVERS AND STREAMS.

The polluting of streams passing through the area can practically be confined to that water course known as the Sketchley Brook.

The pollution of this brook comes mainly from the Hinckley Sewage Works, which discharges into it at a higher point. I understand the Hinckley Urban District Council are taking the necessary action with the sewage works to prevent this pollution.

The other streams in the Borough are not subject to gross pollution.

DRAINAGE AND SEWERAGE.

The main drainage of the town is carried out by gravitation to a central pumping station situated in St. Mary's Road, where a new and adequate (extensions are nearing completion) pumping station is situated.

The sewage is pumped from this Station to a Sewage Works situate outside the boundary at Hartshill. These works are efficient and considering the varying nature of the effluent they have to deal with, are remarkably free from nuisance. (New methods which may have to be adopted at a future date, due to the amount of trade waste from Dyers, Felmongers, etc., should, I think, be flocculating treatment. This should improve the effluent and render less the work asked of the filters.)

The final effluent is discharged into the River Anker.

The part of the town known as Galley Common has, due to its position, a separate sewage disposal plant. The area served is drained to the sewage works by gravitation where it is treated by settling tanks and filters. The final effluent is discharged into the Whittleford Brook.

That part of the town called Bermuda has unfortunately no water carriage system for removal of household sewage. The situation of this district makes drainage difficult, but not impracticable. The Sewage Committee have the matter before them, and it is hoped that soon we will be able to rid this district of the disease breeding privy middens which are in close proximity to the houses.

The outlying districts have of necessity to be dealt with by cess pools, etc., which are unfortunately oftentimes situated in dangerous proximity to the wells used as a water supply to the houses.

CLOSET ACCOMMODATION.

Great strides have been made in the last few years towards the ultimate goal of a complete water carriage system.

This work deserves great praise to Mr. Andrew (Chief Sanitary Inspector) and Mr. Mortimer, both of whom have practically cleared their respective districts, where sewers are available, of privies, etc., greatly to the benefit of the health of the tenant and to the whole of the town.

District.	PRIVIES CONVERTED						No. remaining Dec. 31st, 1925 Sewers Avail- able
	1921	1922	1923	1924	1925	Total	
St. Nicholas ...	14	7	2	2	2	27	1
Attleborough ...	10	17	10	11	4	52	1
St. Mary's ...	1	15	13	25	3	57	3
Stockingford ...	6	12	30	65	9	122	11
Galley Common .	—	—	13	10	17	40	126
Chilvers Coton E	—	3	10	12	3	28	nil
„ „ W	9	8	5	14	12	48	18
Total ...	40	62	83	139	50	374	160

SCAVENCING.

The work of scavenging in the district is being made more efficient by the substitution of movable ashbins in place of the old fixed receptacles. The number of ashpits remaining in the area can be seen in the table below.

The clearing of privies, etc., is performed by ladles and tumbler carts. This method causes some nuisance, as it is bound to do. Expensive appliances for the emptying of these privies are not called for when the obvious remedy is to substitute water carriage and movable dustbins. The general routine of clearing the refuse is by regular weekly visits to each house, where movable bins are used and emptying the refuse into specially constructed carts provided with covers. The ashpit privies are emptied as required.

The method of disposal of the household refuse falls under two main heads— (1) Burning. (2) Tipping.

The amount burnt is roughly two-thirds of the total, the remaining third being tipped.

The burning is carried out by two three-cell destructors, the tins being first removed, pressed and sold. The approach to the destructor is poor, and much time is lost by carts having to wait in turns to deposit their load. The heat generated by the burning refuse is made use of to raise steam to drive the pumps, which lift the sewage to the Hartshill Sewage Disposal Works.

The tipping of refuse is carried out at Stockingford in a disused clay pit of about 50 feet in depth. This tip is unfortunately on fire, which causes a nuisance by smoke to local inhabitants during certain winds. The method adopted at this tip is for carts to unload at two definite points, which are from time to time altered so as to make the advance face of the tip uniform. The refuse is not systematically covered with soil owing to the depth and steep nature of the face of the tip. This tip causes nuisance due to rats, which are being dealt with as well as possible, but owing to the fires which are present, dogs and ferrets cannot be used to their full advantage.

The Committee at the time are considering a scheme which if carried out would do away with the tip nuisance and I think make for more efficiency in the general disposal of household refuse.

District.	NUMBER CONVERTED						No. remaining Dec. 31st, 1925 Sewers Avail- able
	1921	1922	1923	1924	1925	Total	
St. Nicholas ...	7	6	1	1	2	17	1
Attleborough ...	5	13	9	6	4	37	1
St. Mary's ...	1	14	7	16	3	41	2
Stockingford ...	5	3	19	15	8	50	8
Galley Common .	—	—	7	5	9	21	64
Chilvers Coton E	—	2	5	7	2	16	nil
„ „ W	6	5	3	9	8	31	13
Total ...	24	43	51	59	36	213	89

SCHOOLS.

The sanitary conditions of the Elementary Schools in the Borough are satisfactory. All are connected with the main drainage, with one exception. All schools are supplied with town water.

SMOKE ABATEMENT.

No legal action has been taken during the year. Certain works were interviewed and improvements have taken place.

SANITARY CONVENIENCES, Etc.

Nuneaton Ward—St. Nicholas.

	Dry Ash-places.	Sewers available.		Sewers not available.	
		Ashpits.	Privies.	Ashpits.	Privies.
Attleborough Road	—	—	—	—	—
Anker Street	—	—	—	—	—
Abbey Gate	—	—	—	—	—
Abbey Street	—	—	—	—	—
Back Street	—	—	—	—	—
Bond Gate and Street	1	—	—	—	—
Broad Street	—	—	—	—	—
Burgage	—	—	—	1	1
Bridge Street	—	—	—	—	—
Church Street	—	—	—	—	—
Cooper Street	—	—	—	—	—
Glebe Road	—	—	—	—	—
Higham Lane	—	—	—	1	3
Hinckley Road	1	—	—	7	14
High Street	—	—	—	—	—
King Edward Road	—	—	—	—	—
Leicester Road	—	—	—	—	—
Market Place	2	—	—	—	—
Mill Walk	—	—	—	—	—
Newdegate Street & Place	—	—	—	—	—
Oaston Road	—	—	—	1	1
Orchard Street	—	—	—	—	—
Pool Bank Street	—	—	—	—	—
Queen's Road	—	—	—	—	—
Regent Street	—	—	—	—	—
Seymour Road	—	—	—	—	—
Stratford Street	—	—	—	—	—
Vicarage Street	—	1	1	—	—
Weddington Lane	—	—	—	3	4
Wheat Street	—	—	—	—	—
Total	4	1	1	13	23

Attleborough Ward—St. Nicholas.

	Dry Ash-places.	Sewers available.		Sewers not available.	
		Ashpits.	Privies.	Ashpits.	Privies.
Avenue Road	—	—	—	3	3
Attleborough Road	—	—	—	—	—
Bull Street	—	—	—	—	—
Brook Street	—	—	—	—	—
Freer Street	—	—	—	—	—
Garrett Street	—	—	—	—	—
The Green	—	—	—	—	—
George Street	—	—	—	—	—
Gadsby Street	—	—	—	—	—
Hall End	—	—	—	—	—
Highfield Road	—	—	—	—	—
Kem Street	1	1	1	—	—
Lutterworth Road	—	—	—	8	10
Lister Street	1	—	—	—	—
Park Street	—	—	—	—	—
Park Avenue	—	—	—	—	—
Tennant Street	—	—	—	—	—
William Street	—	—	—	—	—
Total	2	1	1	11	13

Stockingford Ward.

Arbury Road	—	1	1	1	1
Bede Road	—	—	—	—	—
Church Road	2	6	9	—	—
Croft Road	2	—	—	1	1
Cross Street	—	—	—	—	—
Clifton Road	—	—	—	—	—
Eadie Street	—	—	—	—	—
Granby Road	1	—	—	—	—
Grove Road	2	—	—	—	—
Haunchwood Road	—	—	—	—	—
Herbert Street	—	—	—	—	—
Hill Street	—	—	—	—	—
John Street	—	—	—	—	—
Meldrum Road	—	—	—	—	—
North Street	—	—	—	—	—
Priory Street	—	—	—	—	—
Short Street	—	—	—	—	—
St. Paul's Road	—	—	—	—	—
Tomkinson Road	—	—	—	2	2
Whittleford Road	—	1	1	—	—
Webb Street	—	—	—	—	—
Westbury Road	—	—	—	—	—
Whitehouse Crescent	—	—	—	—	—
Total	7	8	11	4	4

	Dry Ash-places.	Sewers available. Ashpits.	Privies.	Sewers not available. Ashpits.	Privies.
Galley Common.					
Bucks Hill Road	1	1	1	2	2
Camp Hill Road	—	—	—	4	4
Chancery Lane	1	—	—	2	3
Galley Common	—	—	—	12	23
Hickman Road	—	9	20	4	4
Plough Hill Road	2	—	—	8	12
Rappers Hole	—	—	—	2	5
Robinson's End	—	—	—	8	11
Tunnel Road	—	54	105	2	2
Alders Lane	—	—	—	1	1
Total	4	64	126	45	67

St. Mary's Ward.					
Abbey Street and Upper.	—	—	—	—	—
Abbey Place	—	—	—	—	—
Aston Road	—	—	—	—	—
Abbey Green	1	—	—	—	—
Bottrill Street	—	—	—	—	—
Bath Road	—	—	—	—	—
Charles Street	—	—	—	—	—
Clarence Street	—	—	—	—	—
Countess Road	—	—	—	—	—
Central Avenue	—	—	—	—	—
Corporation Street	—	—	—	—	—
Duke Street	—	—	—	—	—
Earls Road	—	—	—	—	—
Fife Street	—	—	—	—	—
Friary Street	—	—	—	—	—
Graham Street	—	—	—	—	—
James Street	—	—	—	—	—
Jodrell Street	—	—	—	—	—
Midland Road	—	1	2	—	—
Manor Court Road	1	—	—	—	—
Meadow Street	1	—	—	—	—
Manor Court Avenue	—	—	—	—	—
Mount Street	—	—	—	—	—
Mount Street Passage.....	—	—	—	—	—
Merevale Avenue	—	—	—	—	—
Manor Park Road	—	—	—	—	—
Queen's Road	—	—	—	—	—
Stoney Road	—	—	—	—	—
Stanley Road	—	—	—	—	—
St. Mary's Road	—	—	—	—	—
Tuttle Hill	—	1	1	1	3
Toler Road	—	—	—	—	—
Willington Street	—	—	—	—	—
York Street	—	—	—	—	—
Total	3	2	3	1	3

	Dry Ash-places.	Sewers available. Ashpits.	Privies.	Sewers not available. Ashpits.	Privies.
Chilvers Coton West.					
Arbury Road	—	—	—	—	—
Arbury	2	—	—	—	—
Arbury Lane	1	—	—	7	7
Astley Lane	—	—	—	7	7
Ansley Road	—	—	—	2	2
Bull Ring	1	5	6	—	—
Bermuda	—	—	—	47	123
Coventry Road	—	—	—	1	4
College Street	—	3	5	4	5
Griff Village	—	—	—	20	30
Harefield Lane	—	—	—	6	6
Heath End Road	3	5	7	2	3
The Lawns, Arbury	—	—	—	3	4
Mill Gardens	—	—	—	4	4
Total	7	13	18	103	195

Chilvers Coton East.					
Alexandra Street	—	—	—	—	—
Avenue Road	—	—	—	2	2
Arthur Street	—	—	—	—	—
Bridge Street	—	—	—	2	4
Bracebridge Street	—	—	—	—	—
Coton Road	—	—	—	—	—
Cheverel Street	—	—	—	—	—
Chapel Street	—	—	—	—	—
Dugdale Street	—	—	—	—	—
Coventry Road	—	—	—	—	—
Deacon Street	—	—	—	—	—
Edward Street	1	—	—	—	—
Fitton Street	—	—	—	—	—
Frank Street	—	—	—	—	—
George Eliot Street	—	—	—	—	—
Henry Street	—	—	—	—	—
Harold Street	—	—	—	—	—
John Street	—	—	—	—	—
Marlborough Road	—	—	—	—	—
Norman Avenue	—	—	—	—	—
Princes Street	—	—	—	—	—
Princes Avenue	—	—	—	—	—
Riversley Road	—	—	—	—	—
Stewart Street	—	—	—	—	—
Shepperton Street	—	—	—	—	—
Victoria Street	—	—	—	—	—
Windsor Street	—	—	—	—	—
Queen's Road	—	—	—	—	—
Total	1	—	—	4	6

TOTALS.

	Sewers available.			Sewers not available.	
	Dry Ash-places.	Ashpits.	Privies.	Ashpits.	Privies.
Nuneaton St. Nicholas ...	4	1	1	13	23
Attleborough	2	1	1	11	13
St. Mary's	3	2	3	4	4
Stockingford	7	8	11	45	67
Galley Common	4	64	126	1	3
Chilvers Coton West	7	13	18	103	195
Chilvers Coton East	1	—	—	4	6
Totals	28	89	160	181	311

INSPECTIONS BY SANITARY INSPECTORS, 1925.

To Dwelling Houses.

Disinfections after infectious disease ...	194
Re infectious diseases ...	224
Verminous houses stoved ...	7
Applications under the Rent Restriction Act ...	11
Applications to take in lodgers, Corporation houses	3
Applications, house transfers, Corporation houses	16
For drain testing ...	40

To other Premises.

Factories and Workshops ...	3
Lodging Houses ...	2
Canal Boats ...	3
Knacker's Yard ...	2
Offensive Trades ...	3
Petrol and Carbide Licences ...	105
Van Grounds and Van Inspections ...	22
Smoke observations ...	1

To Food Preparing Places.

Meat Preparing places, Fish and Chips, etc. ...	136
Slaughterhouses ...	726
Dairies, Milkshops and Cowsheds ...	358
Abattoir ...	243
Bakehouses ...	25
Ice Cream premises ...	15

Miscellaneous Visits.

Various matters reported to Highways Department	14
Waste of water reported to Water Department ...	10
Miscellaneous visits ...	4154
Letters sent (re nuisances) ...	469

LIST OF FACTORIES, WORKSHOPS & OUTWORKERS.**Factories.**

Description of Factory.	St. Mary's.	St. Nicholas.	Stocking- ford.	Chilvers Coton.	Total.
Hosiery	2	1	—	—	3
Clothiers	2	1	—	1	4
Needle Making	—	1	—	—	1
Boot Making	—	1	—	—	1
Hat Making	1	—	—	—	1
Boot Repairing	—	2	—	—	2
Shoe Heel Making	2	—	—	—	2
Cardboard Box Making	1	—	—	—	1
Leather Making	—	1	—	—	1
Weaving	—	4	—	—	4
Sports Requisites	—	2	—	—	2
Dye Works	—	1	—	—	1
Engineering	2	1	—	3	6
Timber Works	—	1	1	—	2
Wool Spinning	—	1	—	—	1
Printing	—	4	—	—	4
Flour Mills	—	1	—	—	1
Electricity Works	—	—	—	1	1
Laundry	—	1	—	—	1
					—
					39
					—

Workshops.

Tailoring	1	4	—	1	6
Millinery	1	6	—	—	7
Dressmaking	—	3	2	6	11
Carriage Builder	—	2	—	—	2
Wagon Builders and Re- pairers	—	2	2	—	4
Carpenters	2	3	—	1	6
Boot Repairers	1	4	—	1	6
Saddlers	—	1	—	—	1
Shoeing Smiths	—	1	—	1	2
Cycle Repairers	1	4	—	3	8
Scale Repairer	—	1	—	—	1
Bakers	8	16	7	8	39
Watch Repairers	—	1	—	—	1
Photographers	—	—	—	1	1
Electricians	1	—	—	—	1
Gut Scraper	—	1	—	—	1
Welder	1	—	—	—	1

HOUSING.

The general housing conditions of the Borough, without taking into consideration the question of overcrowding and housing shortage, leave in many instances much to be desired, though viewing the houses, as a whole, conditions are fairly good.

We fortunately have no area that can be called an “unhealthy area.”

There is a marked shortage of houses in the Borough, and I estimate that 550 houses are required for present needs.

The Council have during the year erected 43 houses and a scheme is in hand for the building of a further 144.

The increase in the population also keeps adding to the need for more houses, and I see no prospect of satisfying the demands for many years to come, unless there is a greatly increased activity in house building, especially for that part of the population which are in most urgent need of them, namely, the miner, labourer, etc.

This area being a progressive one, the housing problem is not likely to be solved by a decreasing population, on the contrary the population is rapidly increasing and with it the housing problem will increase.

Most of the houses erected in recent years are not within the means of the wages earned by many of our townsfolk. This is an economic problem which is beyond the scope of this report, but one which has to be overcome before the housing problem is solved.

I have extracted the following figures from the Census Return of 1921:—

	Rooms per dwelling.	Families per dwelling.	Persons per family.	Rooms per person.
Nuneaton	5.05	1.07	4.62	1.02
Warwickshire	5.01	1.06	4.31	1.09

Population living more than 2 persons to a room:—

Population.				Percentage of total private family population.		
1921		1911		1921	1911	
3,362	...	1,783	...	8.1	...	4.9
120,017	...	79,501	...	8.9	...	6.6

These figures compare favourably with the County as a whole, but as one sees they are in excess of the 1911 figures.

I have tabulated below 100 cases which have been taken from the list of applicants for Corporation houses, which gives one a better idea of families seeking houses than citing one or two special cases.

No. of houses	100	No. of houses with 1 bedroom ...	10
Total inmates	956	No. of houses with 2 bedrooms ...	34
Average inmates per house 9.5		No. of houses with 3 bedrooms ...	56

Average number of persons per bedroom :—

	Over 15	Under 15	Total
In a one bedroom house	2.3	3.1	5.4
In a two bedroom house	2.3	2.5	4.8
In a three bedroom house	1.6	1.9	3.5

The causes of this overcrowding are due to increased population and the slow rate of building to overcome the arrears of building in past years. A factor which also contributes to the housing shortage is the wider outlook many of our townspeople take in themselves and their children. The man and woman of to-day is not content to live under conditions with which their forefathers were content.

The gross cases of overcrowding are dealt with as far as possible with alternative accommodation and much has been done and is being done by the Sanitary Inspectors for the transference of people to other accommodation. No action has been taken in the Court on account of overcrowding during the year.

The general character of defects found in the houses are :— Dampness; lack of sinks, coppers, food stores; defective eaves-gutters; and yard paving.

Many of these defects are due to the short-sighted policy of some owners of property in leaving minor defects until such time as “ Something has got to be done.” On the other hand there seems to be a lack of men willing to carry out small repairs for landlords who are anxious to keep their property in a fit condition.

While on this subject one must not forget the tenant, who in many instances is the cause of the defect in the house in which he lives. These people are the ones who decry the shortcoming of the landlord, and overlook the lack of care and the neglect they themselves show to the property they inhabit.

No Court action has had to be taken against property owners during the year.

The number of intimation and Statutory Notices served under the Public Health, Housing, and Nuneaton Corporation Acts have been 1,446 of the former, and 267 of the latter.

The difficulties of carrying out repairs to property are in the main due to :—

- (1) Lack of money of the owner (many owners being artisan with heavily mortgaged property).
- (2) Lack of labour to carry out repairs.

Arrangements are made with large property owners to carry out repairs systematically, and many landlords have co-operated well in this respect with the Department.

The tenants of property are advised as to their responsibility as regards the houses they occupy and this work bears fruit in some cases to the advantage of the general community and also to the owner of the property.

We fortunately have no back to back property in the area.

HOUSING STATISTICS, 1925.

Number of New Houses erected during the year:—

(a) Total	206
(b) As part of a Municipal Housing Scheme	43

Unfit Dwelling Houses.

Inspection—

(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	1677
(2) Number of dwelling houses which were inspected and recorded under the Housing (inspection of district) Regulations, 1910	—
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	—
(4) Number of dwelling houses (exclusive of those referred to under preceding sub-heading) found not to be in all respects reasonably fit for human habitation	—

Remedy of Defects without Service of Formal Notice.

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	1446
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Action under Statutory Powers.

(a) Proceedings under Section 28 of the Housing and Town Planning, Etc., Act, 1919	—
(b) Proceedings under Public Health Acts	—
(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	267
(2) Number of dwelling houses in which defects were remedied—	
(a) By owners	231
(b) By Local Authority in default of owners	—
(c) Proceeding under Section 17 and 18 of Housing, Town Planning, etc., Act, 1909	—

NUISANCES ABATED, 1925.

Dwelling Houses.

Plaster of walls and ceilings repaired	16
Roofs repaired	76
Chimneys re-pointed	12
Spouting repaired or new provided	34
Filthy houses cleansed	22
Rotten wooden floors made good	4
New washhouses provided	7

Windows and window frames repaired	...	...	12
Window cords renewed	...	...	1
Fireplaces repaired	...	...	3
Coppers repaired or rebuilt	...	...	15
New sinks provided	...	...	4
Sinks refixed and waste pipes provided	...	...	15
Staircase repaired	...	...	1
Houses re-pointed	...	...	10
New water services provided	...	...	14
Yard paving repaired	...	...	3

Drainage, etc.

Drainage cleared from obstruction	137
Drainage inspection covers provided or repaired...			6
Defective drainage repaired	...	...	1
New gullies provided	...	...	10

Closest Accommodation.

Water closet cisterns repaired	...	...	19
New water closet cisterns provided	...	...	8
Water closets thoroughly repaired	...	...	33
Privies converted into water closets	...	...	50
Additional water closet provided	...	...	1
New w.c. basins fixed	...	...	6

Domestic Refuse.

Dry ashplaces disused	...	...	531
Dustbins provided or repaired	...	...	1148

Other Nuisances.

Offensive accumulations removed	...	...	7
Vans removed	...	...	2

MILK SUPPLY.

The milk supply in the Borough leaves room for improvement; although it is gratifying to report that improvement is taking place slowly, and with the introduction of the Milk and Dairies Order, 1926, I think that greater strides will take place. The general condition of the cow-sheds as regards cleanliness has improved and the one-time nearly universal manure dump at the door of the milking shed is slowly disappearing. This not only improves the general cleanliness of the buiding, etc., but also makes less work ultimately for the farmer by curtailing the amount of matter which the cows take into the sheds and also the amount of grooming. The removal of these breeding grounds of disease (manure dumps) helps greatly in the production of a clean milk supply. Many of the sheds are in poor repair and much will have to be done to render them fit places in which to produce clean milk.

The cows in the Borough are inspected once a quarter by the Council's Veterinary Surgeon (Mr. Barratt) and he reports that the condition of the cattle is satisfactory. I give below the findings of these inspections.

The cleanliness of the cows is a point which, in many instances, requires attention by the dairyman. It is unfortunately all too common to see cows being milked with flanks and udders in such a state that it is impossible to obtain a clean milk supply.

The milking stools are a part of the equipment of a dairy which are seldom cleansed or washed and it is as a rule the milking stool that the milker handles just prior to milking the cow. Many of these stools are coated with excrement. Until these points are rectified, I cannot see how one can report that our milk supply, taken as a whole, can be said to be satisfactory.

I look forward to the time when one will be able to say that the milk not only of this Borough but of the country as a whole is clean and safe.

The Grade A milk which is supplied in our Borough comes from two farmers situated outside our boundary. These farmers are visited by the Department and also by the Sanitary Authority who have granted the producer's licence.

The people in our own town do not seem clear as regards the meaning of Grade A milk.

It is milk which is obtained from farms which produce it under clean conditions and from cows which are certified by a Veterinary Surgeon to be free from disease.

The cows, as stated, are inspected, the cow sheds are in a cleanly state, the milkers have to use overalls, and hands and appliances have to be scrupulously clean. The milk is bottled at the farm in a specially constructed dairy and it has to conform to regulations as regards bacterial count. The results of the milk supply have been at all times well within the limits allowed by the Milk and Dairies Act.

MILK SAMPLES.

	Grade A Milk.			Ordinary.
	No. 1	No. 2		
Organisms per c.c.	450	184	...	4,742,500
B. c.c. in 1/10 c.c.	—	—	...	+

VETERINARY INSPECTION OF COWS.

No. Inspected.		No. Tubercular.		No. Suspected.
831	...	2	...	5
833	...	2	...	8
836	...	—	...	—
841	...	3	...	7

OTHER FOODS.

The general food supply of the town is continually inspected and articles that have been surrendered under the Public Health Act 1875 (Section 116) are tabulated below.

FOOD PREPARING PLACES.

	Registered Premises.	No. of Inspections.
Meat Foods	38	136
Fried Fish Shops ...	35	136
Bakehouses	39	25
Ice Cream Places	16	15

The bakehouses in the town, which number 39, are all of a high standard and kept in a cleanly state. The method of handling bread and the carts in which bread is conveyed to the consumer leaves much to be desired.

This article of food which forms the greater part of the diet of a large number, should be safeguarded from all unnecessary contamination. The purveyors of bread and the like will only have themselves to thank if legislation is brought into force stipulating the manner in which this all important article of food is to be conveyed to our citizens.

MEAT.

The meat supply of the town is very admirably supervised by your Meat Inspector (Mr. Mortimer) who by his vigilance and efficiency, and with the co-operation of the butchers, keeps the meat supply to the people up to a high standard.

The Public Health (Meat) Regulation which came into force on April 1st, 1925, has on the whole worked smoothly. The compulsory notification of slaughter has been carried out readily by the butchers and has now become an established routine. It was found best to allot certain butchers definite weekly times for slaughter rather than make them notify every individual animal that was slaughtered. The persons who do not kill at regular intervals are compelled to give three hours' notice to the Department before slaughter can take place.

The amount of diseased meat surrendered to the Authority will be found tabulated below.

The main disease found was Tuberculosis, which occurred to the largest extent in beasts and pigs. It will be noticed that the amount of condemned meat has increased over last year's figures. This is due, in the main, to the notification of slaughter, whereby all animals are seen by your Meat Inspector.

All condemned meat is disposed of by burning in the Corporation destructor.

The shops stalls, etc., which have to conform to the regulations which came into force in April, 1925, have on the whole carried out the requirements of the Council, but some

slackening off of precaution against protection of the meat exposed for sale was noticed towards the end of the year under review. This, I am glad to report, has at the time of writing been rectified.

The stalls from which meat is sold conform with the regulation but I do not think that a stall in an open market is a satisfactory place from which food stuff should be sold. I consider that when possible these stalls should be moved to a place where the meat, etc., could be safeguarded from contamination.

We have been helped greatly in the working of this Act by the active co-operation given to the Department by the Local Butchers' Association.

The Abattoir which is a modern building consisting of three stalls for slaughter with the necessary appliances, fasting pens for 6 beasts and 30 sheep and pigs, works satisfactorily. During the coming year (1926) a small grazing field will be available for sheep on the now unfenced piece of land in the front of the building. This building is let by stalls, two being let to joint occupiers and the other to one firm. The whole building is kept in a satisfactory state and all meat is inspected before removal.

PRIVATE SLAUGHTER-HOUSES.

	in 1920	in Jan., 1925	in Dec., 1925
Registered	9	9	9
Licensed	9	9	9
	—	—	—
Total	18	18	18
	—	—	—

MEAT AND FOOD CONDEMNED, 1925.

Meat:

	Number of affected Carcases.	Weight (lbs.) Condemned.	
		Tubercular.	Non-tubercular.
Beasts	84	10,696	4,113
Calves	4	151	—
Sheep	9	—	245
Pigs	73	1,665	1,149
Total	170	12,512	5,507

Included in the above total is 4,346lbs. condemned under Tuberculosis Order 1925.

Sundry Foods:

Rabbits	166
Imported beef	22 lbs.
Bacon	40 lbs.
Lambs Sweetbreads	40 lbs.

I am indebted to Mr. Preston, the Inspector of the County Council (Food and Drugs Acts), for the following table:—

Article.	Samples.		Genuine.		Adulterated.
Milk	69	...	61	...	8
Butter	10	...	10	...	—
Cocoa	3	...	3	...	—
Coffee	5	...	5	...	—
Ground Rice	1	...	1	...	—
Custard Powder ...	1	...	1	...	—
Egg Substitute ...	1	...	1	...	—
Apples	6	...	6	...	—
Bloater Paste	1	...	1	...	—
Prescriptions	6	...	6	...	—
Cream of Tartar ...	1	...	1	...	—
Citric Acid	1	...	1	...	—
Epsom Salts	1	...	1	...	—
Powdered Rhubarb	1	...	1	...	—
Ground Ginger ...	2	...	2	...	—
Seidlitz Powders ...	1	...	1	...	—
Camphorated Oil .	2	...	2	...	—
Castor Oil	1	...	1	...	—
Glycerine	2	...	2	...	—
Whiskey	2	...	2	...	—
	—		—		—
	117		109		8
	—		—		—

Seven of the defective Milk samples were due to the dirt being in excess of 2 pts. per 100,000. A caution was given in each case. One Milk sample was deficient of fat; this case was also cautioned.

INFECTIOUS DISEASES.

The general principle on which notifiable infectious diseases have been treated during the year, where possible, was by home isolation. These cases are visited and nursed by the staff of the Isolation Hospital. This method has proved satisfactory and shows a great saving in money. The home isolation of cases also teaches the people the method by which infection can be curtailed, which is not the case when all cases are removed to the Isolation Hospital. The spread of infection in the case of Scarlet Fever by the home isolation method has not been found in practice to be increased, in fact return cases seem to be less frequent.

During the year under review, although 127 out of 164 cases were treated at home, no return cases were found.

The most infectious period of this disease is in the early stages, when the patient is as a rule mixing with the other members of the household, so even with removal to Hospital the damage is as a rule already done before the patient is admitted.

While advocating home isolation for the majority of cases it is impossible to carry this out in all cases owing to the home conditions being such that isolation is impossible.

All severe cases are admitted to Hospital so that they can get the necessary treatment required.

My views on the general treatment of infectious diseases therefore, do not do away with the need for an Isolation Hospital, but advocate it only for selected cases of the various infectious diseases.

Disinfection is carried out by the Department after all cases of infectious disease, the method used is formalin spray. The Corporation steam disinfector is used for bedding and the like in special cases only, no routine other than formalin spraying is used.

HOME VISITING.

Disease.	Cases.	No. of Visits.	
Scarlet Fever	164	...	1266
Measles	748	...	3737
Chickenpox	209	...	987
Diphtheria	46	...	377
Pneumonia	147	...	1107
Erysipelas	21	...	103
Cerebro Spinal Fever .	3	...	16
Encephalitis Lethargica	6	...	45
Acute Anterior Poliomyelitis	1	...	4
Total Visits			<u>7642</u>

ISOLATION HOSPITAL.

	Admitted	Discharged	Remaining in Hospital Dec. 31, 1925		Died
Scarlet Fever	37	...	33	... 4 ...	Nil

The Isolation Hospital nursing staff also carries out the home visiting of the infectious diseases. The amount of work performed this year shows a great increase over last year's figures. The Matron and her staff have worked admirably, as is shown by the above tables.

This hospital has an annexe which is open in the summer months for the treatment of children by sunlight.

During the year 19 cases were treated and some remarkable results obtained.

SCARLET FEVER.

Year.	Notified Cases.			Died.
1921	...	229	...	1
1922	...	199	...	2
1923	...	63	...	0
1924	...	127	...	2
1925	...	164	...	2

This disease shows an increase on the previous year, although the disease continues to be of a mild type.

In the month of August a sharp outbreak occurred in the Borough which was eventually traced to an unrecognised case which had had the disease while at a holiday camp, but at no time did the disease get out of hand.

The Department has not so far made use of the Dick Test, or the latest method of artificial immunity against this disease.

DIPHTHERIA.

Diphtheria was notified in 46 instances, causing 4 deaths. Four cases were sent to Hospital.

The Health Committee decided to open a Ward in the Borough Isolation Hospital for the reception of cases in order that the patients would be saved the journey to the Hinckley Hospital, and also cases will cost less by treating in our own Hospital. This extension will not require an increase of staff, unless we have an abnormal outbreak, when temporary extra staff would have to be employed.

Anti-toxin is supplied free to the practitioners, and I have found that it is used with promptitude. The results of this anti-toxin are well known, but it does not seem to be fully realised that the all important feature of successful treatment is early diagnosis; in some instances the medical men are called in far too late to be able to cut short the illness and prevent complications.

ENCEPHALITIS LETHARGICA.

Six cases of this distressing disease were notified during the year, causing 3 deaths.

PNEUMONIA.

Notification of this disease is compulsory and during the year 147 cases were notified and 50 deaths recorded; this is nearly double that of 1924.

The disease is an infectious one and the method adopted for nursing this disease by the people leaves much to be desired.

Home nursing is supplied by the Corporation in all cases where it is required.

The large number of deaths is not surprising when one sees the condition under which many of these cases are treated. It is the practice of many to nurse the cases, more especially the young ones, in the kitchen or living room, with windows shut and a roaring fire, on which all the ordinary daily cooking is performed. The constant stream of neighbours who visit, with good intentions no doubt, the patient, and overcrowd the room, which has an already vitiated atmosphere, is another point which mitigates to recovery.

The nurses always try and persuade these people to nurse cases in a bedroom, which is naturally quieter and has a good air supply if the windows are used to advantage. The argument generally used against the use of an upstairs room is that it entails more work, but surely the life of a human being is worth some extra work by parents, etc.

OPHTHALMIA NEONATORUM.

The nursing of these cases is carried out by the Health Visitors, each visitor being responsible for the nursing in her particular area.

The number notified was 13; of these all were treated at home with the exception of one, which was sent to Birmingham Hospital.

All retain the sight of the eyes and as far as can be judged will not have impaired sight in after life.

Cases			Vision Unimpaired	Vision Impaired	Total Blindness	Deaths
Notified	Treated					
	At Home	Hospital				
13	12	1	13	nil	nil	nil

No cases of Malaria, Dysentery or Trench Fever have been notified.

The Head Teachers of the Schools in the Borough have been most helpful in notifying and helping to combat the various infectious diseases, full co-operation exists between the School Medical Service and the Health Department, as both come under the same Medical Officer.

The non-notified diseases are dealt with by the School Nursing Service and the infectious disease nursing staff and Health Visitors, the main disease being Whooping Cough, this disease accounted for 9 deaths during the year. The laxity of parents with this disease is very noticeable. The difficulty with this disease is that parents will not realise that a child may have whooping cough without actually whooping. Children with a spasmodic cough followed by sickness, the cough being troublesome at nights, have in the great majority of cases whooping cough, although as already stated they may not be actually whooping. This disease is likely to continue to take its toll of little ones until the parents realise the serious nature of the disease.

SMALLPOX.

This disease accounted for 29 cases during the year; no deaths occurred.

The disease had been in the town since October 1924. The age incidence of the cases occurring in the year under review were as follows:—

Age	1-5	10	15	20	25	35	45	55	65
No.	3	2	2	8	6	4	—	3	1

All these cases were unvaccinated, with the exception of 4; of these one aged 52 had been vaccinated only in childhood so that the protective influence of the vaccine had long since disappeared, the other three vaccinated cases were contacts who developed the disease before the necessary time had elapsed for the vaccine to take effect, so in no case during the year did an adequately vaccinated person develop the disease.

The immediate contacts of these cases numbered 155, this number does not include the large number of persons who had to be supervised but are not recorded as immediate contacts.

The whole of the Department's staff was concentrated on this work and the energy with which all worked eventually eradicated the disease in June of the year.

Much credit is due to the Sanitary Inspectors, nursing and clerical staff for the whole-hearted way in which they carried out their duties.

A large factory in the town, where cases occurred, was inspected and with the co-operation of the Management all employees were inspected, and at the same time practically all those employed were vaccinated.

This helpful co-operation of employers assisted greatly the stamping out of the disease.

No cases have occurred in the Borough since June 1925.

I would like to record that all this work was carried out by your late Medical Officer of Health (Dr. Tapper).

The vaccination of contacts was carried out by the Local Vaccination Officers and the powers under the Public Health (Smallpox Prevention) Regulations 1917 to vaccinate by the Medical Officer of Health were not put into operation.

Total Cases Notified										Total Deaths									
	0-1	1-5	5-15	15-25	25-45	45-65	65+	Total	Cases admitted to Hospital	0-1	1-5	5-15	15-25	25-45	45-65	65+	Total		
Smallpox ...	—	2	4	16	3	4	—	29	29	—	—	—	—	—	—	—	—		
Scarlet Fever ...	—	26	99	29	10	—	—	164	4	—	1	—	1	—	—	—	2		
Diphtheria ...	—	7	23	9	6	1	—	46	4	—	2	2	—	—	—	—	—		
Enteric Fever (including Paratyphoid)	—	—	—	1	—	—	—	1	1	—	—	—	—	—	—	—	4		
Puerperal Fever ...	—	—	—	—	5	—	—	5	—	—	—	—	—	1	—	4	1		
Pneumonia ...	12	43	23	22	18	25	4	147	—	17	14	—	1	2	12	—	50		
Other Diseases generally notifiable																			
Cerebro Spinal Meningitis	2	—	1	—	—	—	—	3	—	—	—	—	—	—	—	—	—		
Encephalitis Lethargica	—	1	—	—	4	1	—	6	—	—	2	—	—	1	—	—	3		
Poliomyelitis ...	1	1	1	—	—	10	—	1	—	—	—	—	—	—	—	—	1		
Erysipelas...	—	—	—	2	5	—	1	21	—	—	—	—	—	—	—	—	—		
Other Diseases notifiable locally																			
Measles ...	—	748	—	—	—	—	—	748	—	1	9	—	—	—	—	—	10		
Chickenpox ...	8	69	125	4	2	1	—	209	—	—	—	—	—	—	—	—	—		

TUBERCULOSIS.

Age Period.	New Cases.						Deaths.					
	Pulmonary.			Non-Pulmonary.			Pulmonary.			Non-Pulmonary.		
	M.	F.	...	M.	F.	...	M.	F.	...	M.	F.	...
0- 1	—	—	...	—	1	...	—	—	...	1	—	...
1- 5	1	2	...	3	—	...	—	—	...	2	1	...
5-10	1	1	...	8	2	...	—	—	...	2	—	...
10-15	1	4	...	—	5	...	—	—	...	2	—	...
15-20	4	5	...	3	2	...	2	3	...	2	1	...
20-25	6	4	...	—	2	...	1	3	...	—	—	...
25-35	5	2	...	1	—	...	6	3	...	—	—	...
35-45	5	2	...	1	1	...	4	5	...	1	—	...
45-55	—	—	...	1	1	...	6	—	...	—	—	...
55-65	—	—	...	—	—	...	8	1	...	1	—	...
65-over	—	—	...	—	—	...	—	1	...	—	—	...
Totals	23	20	...	16	14	...	19	14	...	11	2	...

The number of deaths from this disease has slightly fallen for the pulmonary but has increased in the non-pulmonary type.

The treatment and supervision of this disease is in the hands of the County Council, whose local officer Dr. Cyriax has given me much help during the year with the school children. The Public Health (Prevention of Tuberculosis) Regulations, 1925, has not been utilised up to date, no known cases of Tuberculosis being connected with the distribution of milk.

All practitioners were circulated when the Act came into force and asked to co-operate in bringing to the notice of the Department any persons found suffering with Tuberculosis who had any dealing with the handling and distribution of milk.

No compulsory removal to hospital was enforced under the Public Health Act, 1925.

The deaths recorded during the year, with one exception, were all previously notified.

VENEREAL DISEASE.

The Clinic for the treatment of Venereal Disease situated in the Borough, is administered by the County Council, the Clinical Officer being your own Medical Officer.

I include, by the kind permission of the County Medical Officer of Health, a short account of the work carried out during the year.

The attendance has greatly exceeded that of last year; this one would expect considering the Clinic was only opened in April 1924.

The number of patients may seem high, 139 individual cases being treated during the year, but it is by a long way too few considering the amount of venereal disease present

in the country. Taking the patients on the whole they attend well and endeavour to carry out the complete course of treatment. A certain number who, having contracted this disease have no regard for others, fail to attend till cured and thereby become a danger, unfortunately not only to themselves, but also to the community with whom they mingle.

Venereal Disease inadequately treated causes untold suffering in after-life and it is all too often passed on to the wives of the sufferers and so to the children.

I think the male patients as a whole are realising more the danger of this disease and it is to be hoped that in future reports one will be able to give a higher percentage of patients completing their required treatment.

	Males.	Females.	Total.
No of cases under treatment			
1st January, 1925	27	26	53
No. of new cases in 1925	64	22	86
	<hr/>	<hr/>	<hr/>
Total cases treated in 1925	91	48	139
	<hr/>	<hr/>	<hr/>
Total attendance	1650	486	2136
	<hr/>	<hr/>	<hr/>

17% of cases failed to complete treatment who were in an infectious state.

MATERNITY AND CHILD WELFARE.

The work carried out by the Health Visitors is the all important part of the Maternity and Child Welfare scheme, the Clinics for the babies form a most important cog in the wheel, but this is overshadowed by the work carried out in the homes of the people.

Few realise the difficult task of the Health Visitors; the problems that have to be faced are many and various and my staff during my term of office have carried these duties out well and efficiently.

Method of feeding on first visit of Health Visitor.

Wholly breast fed	...	...	...	784
Partially breast and hand fed	...	...	...	12
Wholly hand fed	...	...	...	52
Wholly mal fed	...	...	...	1

It is gratifying to report that the percentage of breast fed babies was increased during the year, 92% of new babies being breast fed.

The mothers are slowly realising that it is an advantage to themselves as well as the child to have some method in bringing up their children.

The mother who feeds "when baby cries" is truly making a "rod for her own back" and also causing the child unnecessary trouble from indigestion, etc.

The importance of regular breast feeding cannot be over-rated, it is the natural method and least expensive, to say nothing of the beneficial results to the child.

The use of a "dummy" goes hand in hand with irregular feeding. The irregularly fed child does not get an adequate feed, but gets little and often with the result that the child is irritable, also is more or less always hungry and the "dummy" keeps it quiet for the time being, but unfortunately the after-results of this practice are not considered by the average mother.

The table below will give some idea of the great amount of work carried out by the Health Visitors.

The babies are visited after the Midwife has ceased to attend, which is, as a rule, at the end of ten days, and supervision is carried on till the child reaches the age of 5 years when it comes under the School Medical Service.

Home Visiting:

1. Home visiting of babies under 1 year	4575 visits.
2. Home visiting of babies between 1-2 years	4548 ,,
3. Home visiting of babies between 2-5 years	5122 ,,
4. Home visiting to expectant mothers	342 ,,
5. Home nursing of measles under 5 years.....	3737 ,,
6. Home nursing of Ophthalmia Neonatorum...	127 ,,
7. Home nursing of other special cases	— ,,

Welfare Centre:

8. Welfare Session: Nuneaton Centre	97 ,,
8a. Attendances of babies, Nuneaton Centre ...	5764 attendances.
9. Welfare Sessions: Stockingford Centre	95 visits.
9a. Attendances of babies, Stockingford Centre	3499 attendances.

Dental Clinic:

10. Dental Clinic sessions	25
10a. Dental Clinic attendances	186

Antenatal Clinics:

11. Antenatal sessions, Nuneaton (commenced Oct.)	12
11a. Attendances of pregnant mothers	56
12. Antenatal sessions, Stockingford	12
12a. Attendances of pregnant mothers	56
13. Free milk (Grade A.) distributed to necessitous cases	767 pints.
14. Examination of urine specimens of expectant mothers forwarded by midwives	151

The following tabulation gives the general summary of visits paid to special cases of illnesses in babies:—

	Cases.	Visits.
Diseases of Respiratory System	122	292
Diseases of Digestive System	60	146
Diseases of special senses	52	157
Diseases of Infectious Nature	159	389
Diseases of Measles visits	221	260
Diseases surgical	53	259
Diseases of Skin	54	132
Diseases of Breast (mother)	9	45
Diseases not classified	33	90

The supervising authority for the Midwives in the Borough is the County Council, but the closest co-operation exists between this Department and the local Superintendent of Midwives.

We have in the Borough 10 midwives, of these 8 hold the Certificate of the Central Midwives Board and 2 are registered Midwives.

It is gratifying to report that only 3 women lost their lives through child birth as against 7 in 1924.

The great majority of cases are attended by the midwives only and this shows the great part the midwifery service plays and will play in the future health of the mother and her child.

I would like to again urge the necessity of early consultation by the expectant mother with her doctor, midwife, or both, so that the risks of pregnancy can be minimised.

Births notified by Midwife, 974; by Doctor, 24.

ANTE-NATAL CLINIC.

One Clinic per month is held at each Centre to deal with the expectant mother. During the year 112 cases were dealt with; as these Clinics were only opened in October 1924, no previous figures are available for comparison. I consider that these attendances are satisfactory considering the short time the Clinics have been in existence.

The closest co-operation, I am glad to say, exists between the midwives in the district and these clinics. This makes for efficiency and the gaining of the desired results.

The reduction in the number of deaths of infants recorded as premature for 1925, as previously stated, can be attributed to a degree to these clinics, but as the existence of these clinics has been short, it is too early to draw any definite conclusions. The benefit to be gained by early attendance at these clinics is not yet fully realised, but I believe that in time the expectant mother will consider it an absolute necessity to be under expert supervision from the earliest possible time after conception. The lack of hospital accommodation for maternity cases greatly hinders the work carried out by these clinics.

No. of Clinics held	24
Total Patients	112
Total Attendance	138

DENTAL CLINICS.

This Clinic which is worked by Mr. Thomas, L.D.S., as part of the Maternity and Child Welfare scheme continues to do most useful work.

The neglect of the teeth is one of the blots in our national health, and one to which much greater attention and thought should be given by the expectant and nursing mother.

Mr. Thomas reports on the year's work as follows:—

“ During 1925 there were 186 attendances for Dental Treatment at the Infant Welfare Centre.

This number averages out at about 9 attendances per session.

The following operations were performed:—

244 Extractions.

47 Fillings.

85 Other operations.

A considerable advance upon the previous year.

Dentures were supplied in three cases.

The chief obstacle to the development of this service is the prodigious amount of apathy which still persists with regard to the eradication of oral sepsis.

Scores of nursing and expectant mothers are called upon by the Visitors, who promise to attend, and as regularly fail to do so.

In face of this and the extremely wet weather which persisted through the winter the figures are encouraging.”

INFANT WELFARE CENTRES.

	Nuneaton.	Stockingford.
No. of babies on Register, Jan. 1, 1925	454	351
No. of babies added during 1925	377	222
No. of babies ceased to attend	256	199
No. of babies on Register, Jan. 1, 1926	555	374
Total attendances made 1925	5,664	3,999

The Welfare Centres in the district are two in number, one at Nuneaton and the other at Stockingford.

These Centres are open on two afternoons per week, one session per week having a Medical Officer in attendance.

I would like to pay a tribute to the valuable work carried out by the ladies who give their services to these Centres. They all show that keen interest in the work which goes so far in the making of a successful clinic.

The increased number of attendances at both Centres is gratifying, and the credit of this must be given to the Health Visitors who by their untiring efforts in the cause of the children's health plays a most important part in the life of our future generation.

The object of these Centres is not, as is so frequently thought, merely for children with some defect, but also for the children who are physically fit so that by advice they can be so kept.

I tabulate below a classification of diseases found by Drs. Wood and Forrest at the Nuneaton and Stockingford Centres respectively:—

Diseases.	Nuneaton.	Stockingford.
Normal Babies	177	106
Diseases of Digestive system	172	114
Diseases of Respiratory system	100	90
Skin Diseases	58	31
Diseases of Eye	35	11
Diseases of Ear, Nose and Throat	23	12
Congenital diseases	24	16
Hernia and Phimosis	40	11
Orthopædic conditions	4	—
Rickets	14	21
Other diseases	111	18

ORTHAPÆDIC CLINIC.

This Clinic, which is maintained jointly by the Health and Education Committee, was commenced at the latter part of May.

The Surgeon in charge is Mr. Leather, F.R.C.S., of the Orthopædic Hospital, Birmingham, and the Committee have arrangements whereby this parent hospital deals with cases requiring inpatient treatment and also supplies surgical boots, etc., on the order of the Surgeon-in-Charge.

The charge nurse, who has had special training at the Orthopædic Hospital for this work, carries out intermediate treatment, such as massage, exercises, plaster work, etc.

The electrical massage, etc., is performed by Mr. Lark, with whom the Committee have a special arrangement as regards fees.

The number of children dealt with under the Maternity and Child Welfare scheme was 23, of these 7 had had previous treatment.

Cases are referred through the Medical Officer in charge of the Maternity and Child Welfare Centres and private practitioners.

Though the scheme is a new one it so far has entirely justified its existence and should in the future do much for the cripple child.

